## **Certified Marriage License Request**

			Maiden Name	Maiden Name if Applicable:			
			Maiden Name				
Da	te of N	Marriage:					
Nu	mber	of Copies Requested:	\$15.00 for 1 <sup>st</sup> o	\$15.00 for 1 <sup>st</sup> copy: \$6.00 for each additional copy			
Ap	plican	t Name:					
Ap	plican	t Address:					
Ind	licate :	your relationship below to the	ne person on the requeste	ed reco	ord:		
		Self/Spouse		Des	scendent		
		Parent		Atte	orney of	person on record	
		Guardian		Genealogist ID#			
$R_{V}$	mu sian	ature below, I swear/affirm that i	the information above is true	and cor	roct		
Бу	nu sign	ature below, I swear/affirm mai i	ne information above is true	ини сог	reci.		
Ap	plican	t Signature:					
			Below line is for Clerk's us	se only			
Proc	f of iden	tity of applicant:	Applicant must provide on	e of the	se:		
	Drive	er's License				Government issued picture ID	
	Passp	port					
			OR two of these:				
	Utilit	y Bills	on two of mese.	-		Social Security Card	
		Statements				DD 214	
	Vehic	cle Registration				Hospital/Birth Worksheet	
	Incor	ne Tax Return				License/Rental Agreement	
	Perso	onal Check with address				Paystub	
	A pre	eviously issued vital record				W-2	
	Lette	r from government agency reques	sting record (DHHS, WIC)			Voter Registration Card	
	Depa	rtment of Corrections ID Card				Disability Award from SSA	
	Other	·					
			Establishing Eligibility to acqu	ire record	1:		
		ed applicants must provide proof	=				
		Domestic Partners must provide proof of registration of domestic partnership.					
		neys must provide a signed, nota					
	Gene	alogists must provide a state-issu					
			Do not retain copies of proof provided or note a	my specific r	umbers.		

Clerk's Initials: \_\_\_\_\_